

DEPARTMENT OF FINANCE BILL ANALYSIS

AMENDMENT DATE: July 14, 2011
POSITION: Neutral
SPONSOR: California Academy of Physician Assistants

BILL NUMBER: SB 233
AUTHOR: F. Pavley

BILL SUMMARY: Emergency Services and Care

This bill expands the definitions for "emergency services and care" and "consultation", which would allow appropriately licensed medical professionals to provide consultation, care, treatment and surgery in an emergency department setting.

FISCAL SUMMARY

This bill will not have a fiscal impact on the Department of Public Health.

COMMENTS

Finance is neutral with regards to this bill as it would not have any fiscal impact on the state.

According to the author's office, this legislation is necessary due to an issue that arose at an Orange County hospital. A physician assistant (PA) was prohibited by the hospital from providing a consultation in the Emergency Room. These services are often authorized by supervising physicians, but in this case the hospital would not allow the consultation because the Health and Safety Code does not explicitly allow PAs to perform consulting and treatment services in an Emergency Room. State law is in conflict with the federal "Emergency Medical Treatment and Labor Act". This bill would make state law consistent with federal law.

Existing law establishes the Physician Assistant Practice Act to regulate PAs, which provides that a PA may perform those medical services under the supervision of a licensed physician and surgeon, and requires written guidelines for the adequate supervision of the PA. The law further authorizes PAs to administer or provide medication to a patient and authorizes a PA to order durable medical equipment, certify unemployment insurance disability, and, after consultation with the supervising physician, approve, sign, modify, or add to a plan of treatment/care for individuals receiving home health services or personal care services. It also authorizes PAs to conduct specified medical examinations and sign corresponding medical certificates for various individuals.

Existing law requires emergency services and care to be provided to any person requesting the services or care for any condition in which the person has a serious injury or illness or is in danger of loss of life, at any licensed health facility.

Existing law defines "emergency services and care" as the medical screening, examination, and evaluation by a physician, or other appropriate personnel under the supervision of a physician, to determine the care, treatment, and surgery necessary to relieve or eliminate the emergency medical condition, within the capacity of the facility.

This bill would expand this definition by explicitly allowing a surgeon, or other appropriately licensed medical professional under the supervision of a physician and surgeon, to perform these services, if within the scope of that person's license.

Analyst/Principal (0553) B. Nunes	Date	Assistant Program Budget Manager John Doyle	Date
--------------------------------------	------	--	------

Department Deputy Director	Date
----------------------------	------

Governor's Office:	By:	Date:	Position Approved _____
			Position Disapproved _____

BILL ANALYSIS	Form DF-43 (Rev 03/95 Buff)
----------------------	-----------------------------

BILL ANALYSIS/ENROLLED BILL REPORT--(CONTINUED)**Form DF-43****AUTHOR****AMENDMENT DATE****BILL NUMBER**

F. Pavley

July 14, 2011

SB 233

Existing law defines "consultation" as the rendering of an opinion, advice, or prescribing treatment by telephone that is determined to be medically necessary jointly by an emergency and specialty physician. A consultation includes review of the patient's medical records, examination, and treatment of the patient in person by a specialty physician who is qualified to give an opinion or render the necessary treatment in order to stabilize the patient.

This bill would expand this definition by: (1) explicitly allowing other appropriately licensed medical professionals under the supervision of a physician and surgeon, to perform these services, if within the scope of that person's license, (2) allowing the treating physician and surgeon to request to communicate directly with the consulting physician and, when determined to be medically necessary, require the consulting physician to examine the patient in person, and (3) placing ultimate responsibility for the consultation to the patient with the consulting physician.

Code/Department Agency or Revenue Type	SO	(Fiscal Impact by Fiscal Year)							
	LA	(Dollars in Thousands)							
	CO	PROP							Fund
	RV	98	FC	2011-2012	FC	2012-2013	FC	2013-2014	Code
4265/PublicHealth	SO	No	-----	No/Minor	Fiscal Impact	-----			0001